PHA 5-Year and Annual Plan - Final

U.S. Department of Housing and Urban Development Office of Public and Indian Housing

OMB No. 2577-0226 Expires 4/30/2011

| 1.0 | PHA Information | | | | | |
|-----|--|----------------|------------------------------------|-------------------------------|-------------------|-----------------|
| | PHA Name: Clinton Housing Authority | | | PHA Code: TN022 | | |
| | PHA Type: Small High | Performing | ☐ Standard | HCV (Section 8) | | |
| | PHA Fiscal Year Beginning: (MM/YYYY): | 07/2009_ | | | | |
| 2.0 | Tarada da la ACC da de CE | 78.7.1 | . 101 | | | |
| 2.0 | Inventory (based on ACC units at time of F | | | 1 CHOW ' | | |
| | Number of PH units:149 | _ | Ni | umber of HCV units:0_ | | |
| 3.0 | Submission Type | | | | | |
| 3.0 | 5-Year and Annual Plan | Annual | Plan Only | 5-Year Plan Only | | |
| | 3-1 car and Annual Flan | Aimuai | Tian Only | 3-1 car I lan Only | | |
| 4.0 | PHA Consortia | PHA Consorti | a: (Check box if submitting a join | nt Plan and complete table be | elow.) | |
| 7.0 | | | | | | |
| | | 1 | | T | 1 | |
| | | PHA | Program(s) Included in the | Programs Not in the | No. of Uni | ts in Each |
| | Participating PHAs | Code | Consortia | Consortia | Program | |
| | | Code | Consortiu | Consortia | PH | HCV |
| | PHA 1: | | | | | |
| | PHA 2: | | | | | |
| | PHA 3: | | | | | |
| | 5-Year Plan. Complete items 5.1 and 5.2 or | nly at 5-Year | Plan update. | | | |
| 5.0 | | | | | | |
| | Not Applicable. Required only in the 5-1 | Year Plan. | | | | |
| F 1 | Mission. State the PHA's Mission for servi | | -£1: | | C:1: : 41 T | NTT A ? - |
| 5.1 | jurisdiction for the next five years: | ng the needs | of low-income, very low-income | e, and extremely low income | ramilies in the P | HA S |
| | Jurisdiction for the next five years. | | | | | |
| | Not Applicable. Required only in the 5-Y | ear Plan. | | | | |
| | The repairement required only in the c | | | | | |
| 5.2 | Goals and Objectives. Identify the PHA's | quantifiable | goals and objectives that will ena | ble the PHA to serve the nee | ds of low-incom | ne and very |
| | low-income, and extremely low-income fan | | | | | |
| | and objectives described in the previous 5-Y | ear Plan. | - | | | - |
| | | | | | | |
| | Not Applicable. Required only in the 5-Y | 'ear Plan. | | | | |
| | | | | | | |
| | DITA Diam IIm Jaka | | | | | |
| | PHA Plan Update | | | | | |
| | (a) Identify all PHA Plan elements that have | ze been revisa | ed by the PHA since its last Annu | ial Plan submission: | | |
| | (a) Identify an TITAT fair elements that have | ve been revise | ed by the THA since its last Aimi | iai i iaii suoiiiissioii. | | |
| | Financial Resources Element | ent: the CH | A Financial Statement includin | g PHA Operating and Cap | ital Fund, Secti | on 8 Funds. |
| 6.0 | | | ge on an annual basis. The CH | | | |
| 0.0 | available for HUD and pu | blic review a | t the CHA Administration Offi | ce. | on on mo | 100 10 |
| | | | cent Audit is on file at the CHA | | l is available fo | r HUD and |
| | public review. | | | | | |
| | | | : The CHA has completed the | required VAWA Policy and | d will be presei | nting it to the |
| | CHA Board of Commission | ners for app | roval. | | | |
| | | | | | 1 . 1 | |
| | (b) Identify the specific location(s) where the | | y obtain copies of the 5-Year and | Annual PHA Plan. For a co | mplete list of PI | 1A Plan |
| | elements, see Section 6.0 of the instruct Clinton Housing Authority Administr | | | | | |
| | Canton Housing Authority Auministr | auon Omce | • | | | |
| | Hope VI, Mixed Finance Modernization of | or Developm | ent Demolition and/or Disposit | tion Conversion of Public I | Housing Home | ownershin |
| 7.0 | Programs, and Project-based Vouchers. | | | | rousing, frome | ownersinp |
| '.0 | Not Applicable. | come suit | | л присион. | | |
| | KK THE TOTAL | | | | | |
| | | | | | | |
| 8.0 | Capital Improvements. Please complete P | arts 8.1 throu | igh 8.3, as applicable. | | | |
| | • | | | | | |
| | Capital Fund Program Annual Statemen | | | | | |
| 8.1 | | 1 | C | | 0075 1 C 1 | |
| 0.1 | complete and submit the Capital Fund Prog | ram Annuai | Statement/Performance and Eval | uation keport, form HUD-50 | 10/5.1, for each | current and |
| 0.1 | complete and submit the <i>Capital Fund Prog</i> open CFP grant and CFFP financing. | gram Annuai | Statement/Performance and Eval | uation Report, form HUD-50 | 00/5.1, for each | current and |
| 0.1 | 1 | | v | иапоп керот, 10пп нор-эс | 00/5.1, for each | current and |

| 8.2 | Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. See attached form HUD-50075.2 for 5-Year CFP. |
|-----|---|
| 8.3 | Capital Fund Financing Program (CFFP). Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements. Not Applicable. |
| 9.0 | Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. |
| | Not Applicable. PHA is a small PHA and High Performer, therefore this component is required only in 5-year Plan |
| | |
| | |
| 9.1 | Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. |
| 9.1 | jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual |
| 9.1 | jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. |
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| | jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Not Applicable. PHA is a small PHA and High Performer, therefore this component is required only in 5-year Plan Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5- |
| | jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Not Applicable. PHA is a small PHA and High Performer, therefore this component is required only in 5-year Plan Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. |
| | jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Not Applicable. PHA is a small PHA and High Performer, therefore this component is required only in 5-year Plan Additional Information. Describe the following, as well as any additional information HUD has requested. (a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan. |

- 11.0 Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.
 - (a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)
 - (b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)
 - (c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)
 - (d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)
 - (e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)
 - (f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.
 - (g) Challenged Elements
 - (h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)
 - (i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)

ATTACHMENTS:

Resident Advisory Board (RAB) Comments:

The Clinton Resident Advisory Board met on February 4, 2009 to discuss recommended improvements to consider for the FY 2009 and 5-year CFP budgets. The following items were discussed:

- HVAC in TN022-003: CHA has included HVAC in 5-year CFP
- **HVAC in TN022-004**: CHA has included HVAC in ARRA CFP.
- **New floor tile in TN022-004**: CHA has included new tile in the 5-year CFP.
- Windows in TN022-004: CHA has included windows in the 5-year CFP.

Violence Against Women Act Policy- Clinton Housing Authority:

BACKGROUND

The <u>Violence Against Women and Justice Department Reauthorization Act of 2005</u> (VAWA) provides protection for tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on such acts of violence against them.

In general, the law provides, in part, that criminal activity directly relating to domestic violence, dating violence or stalking, engaged in by a member of a tenant's household, or any guest or other persons under the tenant's control, shall not be cause for termination of assistance, tenancy or occupancy rights of the tenant or immediate family member of the tenant's family is the victim or threatened victim of the abuse. The law provides that an incident or incidents of actual or threatened domestic violence, dating violence or stalking will not be construed as serious or repeated violations of the lease by the victim or threatened victim of that violence, and will not be "good cause" for termination of assistance, tenancy, or occupancy rights of a victim of such violence.

Furthermore, the law allows a PHA to "bifurcate" a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights, or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant.

The VAWA also allows PHAs to request an individual to certify that the individual is a victim of abuse and that the incidences of abuse are bona fide. The certification must include the name of the perpetrator, and any other statutorily required information. The victim must provide the certification within 14 business days after the individual receives a request for such a certification from the PHA.

DEFINITIONS

The following definitions were incorporated into the United States Housing Act and apply to this policy:

Domestic Violence: Includes felony or misdemeanor crimes of violence committed by a current or former spouse of the victim, by a person with whom the victim share a child in common, by a person who is cohabitating with, or has cohabited with the victim as a spouse, by a person similarly situated to a spouse of the victim under the domestic or family violence laws of the jurisdiction receiving grant monies, or by any other person against an adult or youth victim who is protected from that person's acts under the domestic or family violence laws of the jurisdiction.

Dating Violence: Violence committed by a person:

• who is or has been in a social relationship of a romantic or intimate nature with the victim; and

Revised 7/13/06 Page 3 of 30 form **HUD-50075** (4/2008)

• where the existence of such a relationship shall be determined based on a consideration of the following factors: 1) the length of the relationship; 2) the type of relationship, and 3) the frequency of interaction between the persons involved in the relationship.

Stalking: To follow, pursue, or repeatedly commit acts with the intent to kill, injure, harass, or intimidate; or to place under surveillance with the intent to kill, injure, harass, or intimidate another person; and in the course of, or as a result of, such following, pursuit, surveillance, or repeatedly committed acts, to place a person in reasonable fear of the death of, or serious bodily injury to, or to cause substantial emotional harm to 1) that person; 2) a member of the immediate family of that person, or 3) the spouse or intimate partner of that person.

Immediate Family Member: A spouse, parent, brother or sister, or child of the person, or an individual to whom that person stands in loco parentis (in place of a parent); or any other person living in the household of that person and related to that person by blood or marriage.

POLICY

The following policy amends the *Admissions and Occupancy Policy (ACOP)* and the Apartment Lease by reference. Appropriate language will be added to the ACOP and Apartment lease at the next revision dates of each.

A copy of this policy is available at the main office of the housing authority. A copy will be made available on request.

Admissions and Occupancy and Termination of Assistance

Being a victim of domestic violence, dating violence, or stalking, will not be considered by the Clinton Housing Authority to be a basis for denial of assistance, or admission to public housing if the application otherwise qualifies for assistance or admission.

Incidents or threats of abuse will not be construed by the Clinton HA as serious or repeated violations of the lease or other "good cause" for termination of the assistance, tenancy, or occupancy rights of a victim of abuse.

Criminal activity directly relating to abuse, engaged in by a member of a tenant's household or any guest or other person under the tenant's control, shall not be cause for termination of assistance, tenancy or occupancy rights if the tenant or an immediate family member of the tenant's family is the victim or threatened victim of the abuse.

Rights of the Clinton Housing Authority

The Clinton HA may bifurcate a lease, or remove a household member from a lease, without regard to whether a household member is a signatory to the lease, in order to evict, remove, terminate occupancy rights or terminate assistance to any individual who is a tenant or lawful occupant and who engages in criminal acts of physical violence against family members or others, without evicting, removing, terminating assistance to, or otherwise penalizing the victim of such violence who is also a tenant or lawful occupant, and such eviction, removal, termination of occupancy rights, or termination of assistance shall be effected in accordance with the procedures prescribed by federal, state and local law for the termination of leases, or assistance under HUD's Public Housing Program.

Certification of Abuse and Confidentiality

The Clinton HA will require that an individual certify that he/she is a victim of abuse and that the incidences of abuse are bonafide. The certification must include the name of the perpetrator, and any other statutorily required information. The victim must provide the certification to the PHA within 14 business days after the individual receives a request from the PHA. The individual may utilize the attached *Form HUD 50066*, *Certification of Domestic Violence*, *Dating Violence*, or *Stalking* to certify the abuse to the Clinton HA. In lieu of Form HUD 50066, the individual may provide the Clinton HA with documentation signed by an employee, agent, volunteer of a victim service provider, an attorney, or a medical profession from whom the victim has sought assistance in addressing domestic violence, dating violence, or stalking, or the affects of the abuse, in which the professional attests (under penalty or perjury (28 U.S.C. 1746) to the professionals believe that the incident or incidents in question are bonafide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation. In cases where the individual does not submit the required certification, the PHA may terminate assistance.

Notification to Residents

The PHA will provide notice to all residents and applicants of their rights under Section 6 of the United States Housing Act of 1937 as amended by the <u>Violence Against Women Act of 2005</u>. These rights include the residents' right to confidentiality and the limits thereof, the availability of Form HUD 50066, and that the resident may not be evicted solely on the basis that they are a victim of domestic violence. A sample notice is included with this policy.

Confidentiality

All information provided to the Clinton HA relating to the incident(s) of domestic violence, including the fact that the individual is a victim of domestic violence, dating violence, or stalking will be retained in confidence by the Clinton HA and will not be entered into any shared database nor provided to a related entity, except to the extent that the disclosure is (a) requested or consented by the individual in writing; (b) required for use in an eviction proceeding or termination of assistance; or, (c) otherwise required by applicable law.

CLINTON HOUSING AUTHORITY

NOTICE TO RESIDENTS AND APPLICANTS REGARDING RIGHTS UNDER THE VIOLENCE AGAINST WOMEN ACT

The <u>Violence Against Women Act of 2005</u> (VAWA) protects victims of domestic violence, dating violence and stalking. These changes affect all persons assisted under the Public Housing and Section 8 Program.

Individuals may not be denied housing assistance, terminated from Public Housing or evicted for being the victim of domestic violence, dating violence or stalking. However, the VAWA provides certain limitations and clarifications concerning your rights. In particular, you should know that nothing contained in VAWA:

- 1. Prevents the Housing Authority from terminating tenancy and evicting for any violation of a lease that is not based on a matter involving domestic violence, dating violence, or stalking for which VAWA provides protections as described above. However, the Clinton HA may not in such cases apply any stricter standard to you than to other tenants.
- 2. Prevents the PHA from terminating tenancy and evicting where the housing authority can demonstrate "an actual and imminent threat to other tenants or those employed at or providing service to the property." Where such a threat can be demonstrated by the Clinton HA, you will not be protected from eviction by VAWA.
- 3. Limits the ability of the Clinton HA to comply with court orders addressing rights of access to or control of the property. This includes civil protection orders entered for the protection of the victim or relating to the distribution or possession of property.
- 4. Supersedes any federal, state or local law that provides greater protections than VAWA.

VAWA also creates a new authority under federal law that allows a housing authority to evict, remove, or terminate assistance to any individual tenant or lawful occupant of public housing who engages in criminal acts of physical violence against family members or others. This may be done without evicting or taking any other action adverse to the other occupants.

If you believe that you qualify for protection under VAWA, please notify the PHA. You will be asked to provide proof of your situation by filling out Form HUD 50066 and/or providing a copy of an order of protection, police or court report or a signed document from a victim service provider, medical provider or attorney who has provided a service related to the violence. You must submit this information within 14 business days of the PHA's request for it. Protections may not apply if the documentation is provided after 14 days. Form HUD 50066 will be provided at the office.

The Clinton Housing Authority will make every effort to correspond with victims in a way that will not put them at greater risk. The Clinton HA may request that applicants or residents requesting VAWA protection come to the office to submit information. All information will be kept confidential by the Clinton Housing Authority and will not be shared or disclosed by the Housing Authority without your consent except as noted in the Confidentiality clause of the VAWA Policy.

You may obtain a copy of the PHA's written policy concerning domestic violence, dating violence, and stalking from the HA's main office. Please note that the written policy contains, among other things, definitions of the terms "domestic violence", "dating violence", "stalking", and "immediate family".

Other resources that may be of assistance include the National Domestic Violence Hotline (1-800-799-SAFE), and the National Domestic Violence Hotline website http://www.ndvh.org.

CERTIFICATION OF DOMESTIC VIOLENCE, DATING VIOLENCE, OR STALKING

U.S. DEPARTMENT OF HOUSING AND URBAN DEVELOPMENT

OMB Approval No. 2577-0249 Exp (05/31/2007)

Public reporting burden for this collection of information is estimated to average 1 hour per response. This includes the time for collecting, reviewing, and reporting the data. Information provided is to be used by PHAs and Section 8 owners or managers to request a tenant to certify that the individual is a victim of domestic violence, dating violence or stalking. The information is subject to the confidentiality requirements of the HUD Reform Legislation. This agency may not collect this information, and you are not required to complete this form unless it displays a currently valid OMB control number.

Purpose of Form: The Violence Against Women and Justice Department Reauthorization Act of 2005 protects qualified tenants and family members of tenants who are victims of domestic violence, dating violence, or stalking from being evicted or terminated from housing assistance based on acts of such violence against them.

Use of Form: A family member must complete and submit this certification, or the information that may be provided in lieu of the certification, within 14 business days of receiving the written request for this certification by the PHA, owner or manager. The certification or alternate documentation must be returned to the person and address specified in the written request for the certification. If the family member has not provided the requested certification or the information that may be provided in lieu of the certification by the 14th business day or any extension of the date provided by the PHA, manager and owner, none of the protections afforded to victims of domestic violence, dating violence or stalking (collectively "domestic violence") under the Section 8 or public housing programs apply.

Note that a family member may provide, in lieu of this certification (or in addition to it):

- (1) A Federal, State, tribal, territorial, or local police or court record; or
- (2) Documentation signed by an employee, agent or volunteer of a victim service provider, an attorney or a medical professional, from whom the victim has sought assistance in addressing domestic violence, dating violence or stalking, or the effects of abuse, in which the professional attest under penalty of perjury (28 U.S.C. 1746) to the professional's belief that the incident or incidents in question are bona fide incidents of abuse, and the victim of domestic violence, dating violence, or stalking has signed or attested to the documentation.

Date Written Request Received By Family Member:

Name of the Victim of Domestic Violence:

Name(s) of other family members listed on the lease

Name of the abuser:

Relationship to Victim:

Date the incident of domestic violence occurred:

Time:

Location of Incident:

Form HUD-5066
(11/2006)
Name of victim:

| Description of Incident: |
|--|
| [INSERT TEXT LINES HERE] |
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| hereby certify that the information that I have provided is true and correct and I believe that, based on the information I have provided, that I am a victim of domestic violence, dating violence or stalking and that the incident(s) in question are bona fidencidents of such actual or threatened abuse. I acknowledge that submission of false information relating to program eligibility is a basis for termination of assistance or eviction. |
| Signature Executed on (Date) |
| All information provided to a PHA, owner or manager relating to the incident(s) of domestic violence, including the fact that a ndividual is a victim of domestic violence shall be retained in confidence by an owner and shall neither be entered into an shared database nor provided to any related entity, except to the extent that such disclosure is (i) requested or consented to by the ndividual in writing; (ii) required for use in an eviction proceeding or termination of assistance; or (iii) otherwise required by applicable law. |
| |
| |

| Part I: | Summary | | | | | |
|-------------------|---|--|---|-----------------------|------------|---------------------------|
| PHA Na Clinton | ame: Housing Authority | Grant Type and Number Capital Fund Program Grant No: TN37P0225 Date of CFFP: | 0109 Replacement Hou | using Factor Grant No | FFY of Gra | int:2009 int Approval: |
| | inal Annual Statement ormance and Evaluation R | Reserve for Disasters/ Emergencies eport for Period Ending: | □Revised Annual State □Final Performance an |) | | |
| Line | Summary by Developm | ent Account | Total Estima | ted Cost | Total Act | ual Cost ¹ |
| | | | Original | Revised ² | Obligated | Expended |
| 1 | Total non-CFP Funds | | \$0.00 | | | |
| 2 | 1406 Operations (may no | t exceed 20% of line 21) 3 | \$5,000.00 | | | |
| 3 | 1408 Management Impro | vements | \$46,000.00 | | | |
| 4 | 1410 Administration (may | not exceed 10% of line 21) | \$500.00 | | | |
| 5 | 1411 Audit | | \$0.00 | | | |
| 6 | 1415 Liquidated Damage | S | \$0.00 | | | |
| 7 | 1430 Fees and Costs | | \$19,700.00 | | | |
| 8 | 1440 Site Acquisition | | \$0.00 | | | |
| 9 | 1450 Site Improvement | | \$0.00 | | | |
| 10 | 1460 Dwelling Structures | | \$156,800.00 | | | |
| 11 | 1465.1 Dwelling Equipme | ent—Nonexpendable | \$0.00 | | | |
| 12 | 1470 Non-dwelling Struct | ures | \$0.00 | | | |
| 13 | 1475 Non-dwelling Equip | ment | \$2,000.00 | | | |
| 14 | 1485 Demolition | | \$0.00 | | | |
| 15 | 1492 Moving to Work De | monstration | \$0.00 | | | |
| 16 | 1495.1 Relocation Costs | | \$0.00 | | | |
| 17 | 1499 Development Activi | ties ⁴ | \$0.00 | | | |
| 18a | 1501 Collaterization or Do | ebt Service paid by the PHA | \$0.00 | | | |
| 18b | | ebt Service paid Via System of Direct Payment | \$0.00 | | | |
| 19 | 1502 Contingency (may r | not exceed 8% of line 20) | \$0.00 | | | |
| 20 | Amount of Annual Grant: | (sum of lines 2 – 19) | \$230,000.00 | | | |
| 21 | Amount of line 20 Related | d to LBP Activities | \$0.00 | | | |
| 22 | | d to Section 504 Activities | \$0.00 | | | |
| 23 | Amount of line 20 Related | | \$0.00 | | | |
| 24 | | ed to Security – Hard Costs | \$0.00 | | | |
| 25 | Amount of line 20 Related | d to Energy Conservation Measures | \$156,800.00 | | | |

¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations
⁴ RHF funds shall be included here

| Part I: Summary | | | | | |
|--|------------|--|-----------------------------|--|--------------------------------|
| PHA Name: Clinton Housing Authority | Capital Fi | oe and Number und Program Grar nent Housing Fact | | Federal FY of Grant: 2009 FFY OF Grant Approval: | |
| Type of Grant | | _ | | | |
| ☑Original Annual Statement ☐Reserve for Dis | | | evised Annual Statement (re | | |
| ☐Performance and Evaluation Report for Period Endi | ing: | Fi | nal Performance and Evalua | ation Report | |
| Line Summary by Development Account | | Tota | I Estimated Cost | T | Total Actual Cost ¹ |
| | | Original | Revised ² | Obligated | Expended |
| Signature of Executive Director | Date | 9 | Signature of Public Housing | Director | Date |
| _ | | | _ | | |
| | | | | | |

| PHA Name: | | Grant Type and | | | | | Federal FFY of C | Frant: 2009 | |
|---|---|---|---------------------|----------|--------------|----------------------|---------------------------------|--------------------------------|-------------------|
| Clinton Housing | g Authority | Capital Fund Program Grant No: TN37P02250109 CFFP (Yes/No): No Replacement Housing Factor Grant No: | | | | | | | |
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | | Dev. Acct No. | Quantity | Total Estin | nated Cost | Total Actual Cost | | Status of Work |
| | | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| PHA-Wide | Operations | | 1406 | LS | \$5,000.00 | | | | |
| PHA-Wide | Security | | 1408 | LS | \$44,000.00 | | | | |
| PHA-Wide | Computer Upgrade | | 1408 | LS | \$1,000.00 | | | | |
| PHA-Wide | Training/Travel | | 1408 | LS | \$1,000.00 | | | | |
| PHA-Wide | Office Equipment | | 1475 | LS | \$1,000.00 | | | | |
| PHA-Wide | Maintenance Equipm | nent | 1475 | LS | \$1,000.00 | | | | |
| PHA-Wide | Environmental Revie | ew . | 1430 | LS | \$1,200.00 | | | | |
| PHA-Wide | A/E Services | | 1430 | LS | \$15,000.00 | | | | |
| PHA-Wide | Agency Plan | | 1430 | LS | \$3,500.00 | | | | |
| PHA-Wide | Advertising | | 1410 | LS | \$500.00 | | | | |
| TN022-004 | Window Replacemen | nt | 1460 | LS | \$156,800.00 | | | | |
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| | | | | | | | | | |
| Total | | | | | \$230,000.00 | | | | |

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

| PHA Name: Clinton Ho | Federal FY of Grant: 2009 | | | | |
|---|---------------------------------|-------------------------------|---------------------------------|-------------------------------|---|
| Development Number Name/PHA-Wide Activities | All Fund C (Quarter En | bligated ding Date) | All Funds (Quarter En | Expended nding Date) | Reasons for Revised Target Dates ¹ |
| | Original Obligation End Date | Actual Obligation End Date | Original Obligation End Date | Actual Obligation End Date | |
| PHA-Wide | 6/30/11 | | 6/30/13 | | |
| TN022-004 | 6/30/11 | | 6/30/13 | | |
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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

ATTACHMENTS

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226 Expires 4/30/2011

| Part I: S | Summary | | | | | • |
|--------------------|--|--|---|------------------------|--------------------------------------|-----------------------|
| | Housing Authority | Grant Type and Number Capital Fund Program Grant No: TN37S0225 Date of CFFP: | · | using Factor Grant No: | FFY of Gra FFY of Gra ARRA 200 | int Approval: |
| ⊠Origii □ Borfo | nal Annual Statement rmance and Evaluation Re | Reserve for Disasters/ Emergencies | □Revised Annual State □Final Performance an | |) | |
| Line | Summary by Developme | | Total Estima | | Total Act | ual Cost ¹ |
| Line | Cummary by Developme | chi Addduni | Original | Revised ² | Obligated | Expended |
| 1 | Total non-CFP Funds | | 0.00 | 11011000 | | |
| 2 | | t exceed 20% of line 21) 3 | 0.00 | | | |
| 3 | 1408 Management Improv | | 0.00 | | | |
| 4 | | not exceed 10% of line 21) | 0.00 | | | |
| 5 | 1411 Audit | • | 0.00 | | | |
| 6 | 1415 Liquidated Damages | S | 0.00 | | | |
| 7 | 1430 Fees and Costs | | 48,000.00 | | | |
| 8 | 1440 Site Acquisition | | 0.00 | | | |
| 9 | 1450 Site Improvement | | 0.00 | | | |
| 10 | 1460 Dwelling Structures | | 242,572.00 | | | |
| 11 | 1465.1 Dwelling Equipme | nt—Nonexpendable | 0.00 | | | |
| 12 | 1470 Non-dwelling Struct | ures | 0.00 | | | |
| 13 | 1475 Non-dwelling Equipr | ment | 0.00 | | | |
| 14 | 1485 Demolition | | 0.00 | | | |
| 15 | 1492 Moving to Work Der | monstration | 0.00 | | | |
| 16 | 1495.1 Relocation Costs | | 0.00 | | | |
| 17 | 1499 Development Activit | | 0.00 | | | |
| 18a | | ebt Service paid by the PHA | 0.00 | | | |
| 18b | | ebt Service paid Via System of Direct Payment | 0.00 | | | |
| 19 | 1502 Contingency (may n | | 0.00 | | | |
| 20 | Amount of Annual Grant: | 1 | 290,572.00 | | | |
| 21 | Amount of line 20 Related | | 0.00 | | | |
| 22 | Amount of line 20 Related | | 0.00 | | | |
| 23 | Amount of line 20 Related | • | 0.00 | | | |
| 24 | | d to Security – Hard Costs | 0.00 | | | |
| 25 | Amount of line 20 Related | to Energy Conservation Measures | 0.00 | | | |

¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations
⁴ RHF funds shall be included here

| Part I: Su | ımmary | | | | | |
|------------|--|------------|---|------------------------------|---|-------------|
| PHA Nar | ne: Clinton Housing Authority | Capital Fu | oe and Number und Program Granent Housing Fa | ARRA FFY OF | Federal FY of Grant: ARRA FFY OF Grant Approval: ARRA 2009 | |
| Type of (| | | | | | |
| | al Annual Statement ☐Reserve for Di | | | Revised Annual Statement (re | | |
| Perfor | mance and Evaluation Report for Period End | ding: | | Final Performance and Evalua | ation Report | |
| Line | Summary by Development Account | | Tot | tal Estimated Cost | Total Ac | ctual Cost¹ |
| | | | Original | Revised ² | Obligated | Expended |
| Signatur | e of Executive Director | Date | | Signature of Public Housing | Director Da | te |
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form **HUD-50075.1** (4/2008)

| PHA Name: Clinton Housing | g Authority | Grant Type and Capital Fund Pro Replacement Ho | gram Grai | nt No: TN37S0 2 | Federal FFY of C | Grant: ARRA 2009 | | | |
|---|--|--|---------------------|------------------------|------------------|----------------------|---------------------------------|--------------------------------|-------------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | | Dev. Acct No. | Quantity | Total Estin | nated Cost | Total Ac | tual Cost | Status of Work |
| | | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| PHA-Wide | A/E Management | | 1430 | LS | 12,000.00 | | | | |
| PHA-Wide | Fees and Costs | | 1430 | LS | 30,000.00 | | | | |
| PHA-Wide | Physical Needs Ass | sessment | 1430 | LS | 6,000.00 | | | | |
| TN022-004 | HVAC | | 1460 | LS | 200,000.00 | | | | |
| TN022-004 | Electrical Upgrade | | 1460 | LS | 20,000.00 | | | | |
| TN022-004 | Windows | | 1460 | LS | 22,572.00 | | | | |
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¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

| PHA Name: Clinton Ho | Federal FY of Grant: ARRA 2009 | | | | |
|---|---|--|----------------------------|--|---|
| Development Number Name/PHA-Wide Activities | All Fund C (Quarter En | | All Funds I (Quarter En | | Reasons for Revised Target Dates ¹ |
| | Original Obligation Actual Obligation End Date End Date | | Original Obligation | | |
| PHA-Wide | 3/18/2010 | | 3/18/2012 | | |
| TN022-004 | 3/18/2010 | | 3/18/2012 | | |
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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| Part I: | Summary | | | | | |
|---------|---|---|--------------|---|--------------------|---------------------|
| | Housing Authority | Grant Type and Number Capital Fund Program Grant No: TN37P022 Date of CFFP: | · | | of Grant Approval: | |
| | inal Annual Statement ormance and Evaluation R | ☐Reserve for Disasters/ Emer | | ed Annual Statement (Performance and Eval | | |
| Line | Summary by Developm | | Total Estima | | Total Actua | I Cost ¹ |
| Lino | Cummary by Developm | ione / Goodine | Original | Revised ² | Obligated | Expended |
| 1 | Total non-CFP Funds | | 0.00 | 0.00 | 0.00 | 0.00 |
| 2 | 1406 Operations | | 5,300.00 | 29,856.00 | 0.00 | 0.00 |
| 3 | 1408 Management Impro | ovements | 50,000.00 | 50,000.00 | 0.00 | 0.00 |
| 4 | 1410 Administration | | 500.00 | 500.00 | 57.38 | 57.38 |
| 5 | 1411 Audit | | 0.00 | 0.00 | 0.00 | 0.00 |
| 6 | 1415 Liquidated Damage | es | 0.00 | 0.00 | 0.00 | 0.00 |
| 7 | 1430 Fees and Costs | | 19,700.00 | 19,700.00 | 16,200.00 | 12,913.06 |
| 8 | 1440 Site Acquisition | | 0.00 | 0.00 | 0.00 | 0.00 |
| 9 | 1450 Site Improvement | | 6,000.00 | 6,000.00 | 0.00 | 0.00 |
| 10 | 1460 Dwelling Structures | 8 | 95,500.00 | 95,500.00 | 0.00 | 0.00 |
| 11 | 1465.1 Dwelling Equipme | ent—Nonexpendable | 0.00 | 0.00 | 0.00 | 0.00 |
| 12 | 1470 Nondwelling Struct | ures | 0.00 | 0.00 | 0.00 | 0.00 |
| 13 | 1475 Nondwelling Equip | ment | 27,000.00 | 27,000.00 | 0.00 | 0.00 |
| 14 | 1485 Demolition | | 0.00 | 0.00 | 0.00 | 0.00 |
| 15 | 1490 Replacement Rese | | 0.00 | 0.00 | 0.00 | 0.00 |
| 16 | 1492 Moving to Work De | | 0.00 | 0.00 | 0.00 | 0.00 |
| 17 | 1495.1 Relocation Costs | | 0.00 | 0.00 | 0.00 | 0.00 |
| 18 | 1499 Development Activ | | 0.00 | 0.00 | 0.00 | 0.00 |
| 19 | 1501 Collaterization or D | ebt Service | 0.00 | 0.00 | 0.00 | 0.00 |
| 20 | 1502 Contingency | | 1,000.00 | 1,000.00 | 0.00 | 0.00 |
| 21 | Amount of Annual Grant: | | 205,000.00 | 229,556.00 | 16,257.38 | 12,970.44 |
| 22 | Amount of line 21 Relate | | 0.00 | 0.00 | 0.00 | 0.00 |
| 23 | I . | d to Section 504 compliance | 0.00 | 0.00 | 0.00 | 0.00 |
| 24 | | d to Security – Soft Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 25 | | ed to Security – Hard Costs | 0.00 | 0.00 | 0.00 | 0.00 |
| 26 | Amount of line 21 Relate | d to Energy Conservation Measures | 0.00 | 0.00 | 0.00 | 0.00 |

¹ To be completed for the Performance and Evaluation Report
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations

⁴ RHF funds shall be included here

Annual Statement/Performance and Evaluation Report Capital Fund Program, Capital Fund Program Replacement Housing Factor and Capital Fund Financing Program U.S. Department of Housing and Urban Development Office of Public and Indian Housing Expires 4/30/2011

| Part I: Summary | | | | | | | | |
|---|-----------|---|----------------------------|--|-------------------------------|--|--|--|
| PHA Name: Clinton Housing Authority | Capital F | oe and Number und Program Gran nent Housing Facto | 20 | Federal FY of Grant: 2008 FFY OF Grant Approval: | | | | |
| Type of Grant | | | | | | | | |
| ☐Original Annual Statement ☐Reserve for Dis | | | vised Annual Statement (re | | | | | |
| | ıng: | | nal Performance and Evalua | ition Report | | | | |
| Line Summary by Development Account | | Total | Estimated Cost | То | otal Actual Cost ¹ | | | |
| | | Original | Revised ² | Obligated | Expended | | | |
| Signature of Executive Director | Date | Date Signature of Public Housing Director | | Director | Date | | | |
| - | | | _ | | | | | |
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form **HUD-50075.1** (4/2008)

| PHA Name: Clinton Housing Auth | ority | Frant Type and N Capital Fund Prog Replacement Hou | ıram Gran | | 2250108 CFFP | (Yes/No): No | Federal FFY of G | rant: 2008 | |
|--|--------------------------|---|---------------------|----------|--------------|----------------------|---------------------------------|--------------------------------|-------------------|
| Development Number Name/HA-Wide Activities | General Descr Work Ca | iption of Major | Dev. Acct No. | Quantity | Total Estin | nated Cost | Total Actual Cost | | Status of Work |
| | | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| PHA-Wide | Operations | | 1406 | | 5,300.00 | 29,856.00 | 0.00 | 0.00 | |
| PHA-Wide | Security | | 1408 | | 44,000.00 | 44,000.00 | 0.00 | 0.00 | |
| PHA-Wide | Computer Upgrade | 9 | 1408 | | 1,000.00 | 1,000.00 | 0.00 | 0.00 | |
| PHA-Wide | Training/Travel | | 1408 | | 5,000.00 | 5,000.00 | 0.00 | 0.00 | |
| PHA-Wide | Advertising | | 1410 | | 500.00 | 500.00 | 57.38 | 57.38 | |
| PHA-Wide | Environmental Rev | /iew | 1430 | | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | |
| PHA-Wide | A/E Services | | 1430 | | 15,000.00 | 15,000.00 | 15,000.00 | 11,713.06 | |
| PHA-Wide | Agency Plan | | 1430 | | 3,500.00 | 3,500.00 | 0.00 | 0.00 | |
| PHA-Wide | Sidewalk Repair/R | eplacement | 1450 | | 1,000.00 | 1,000.00 | 0.00 | 0.00 | |
| PHA-Wide | Landscaping | | 1450 | | 5,000.00 | 5,000.00 | 0.00 | 0.00 | |
| PHA-Wide | New water closets | | 1460 | | 1,000.00 | 1,000.00 | 0.00 | 0.00 | |
| PHA-Wide | Door hardware | | 1460 | | 1,000.00 | 1,000.00 | 0.00 | 0.00 | |
| PHA-Wide | Lawn mower | | 1475 | | 0.00 | 0.00 | 0.00 | 0.00 | |
| PHA-Wide | Maintenance vehic | ele | 1475 | | 25,000.00 | 25,000.00 | 0.00 | 0.00 | |
| PHA-Wide | Office Equipment | | 1475 | | 1,000.00 | 1,000.00 | 0.00 | 0.00 | |
| PHA-Wide | Maintenance Equi | oment | 1475 | | 1,000.00 | 1,000.00 | 0.00 | 0.00 | |
| PHA-Wide | Contingency | | 1502 | | 1,000.00 | 1,000.00 | 0.00 | 0.00 | |
| TN022-001 | Bathroom renovati | ons | 1460 | 40 | 93,500.00 | 0.00 | 0.00 | 0.00 | |
| TN022-004 | Window Replacem | nent (from 2010) | 1460 | 312 | 0.00 | 93,500.00 | 0.00 | 0.00 | |
| | | | | | | | | | |
| <u> </u> | | | | | | | | | |

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report

| PHA Name: Clinton Ho | using Authority | | | | Federal FY of Grant: 2008 |
|---|---------------------------------|-------------------------------|---------------------------------|-------------------------------|----------------------------------|
| Development Number Name/PHA-Wide Activities | All Fund C (Quarter En | Obligated ding Date) | All Funds (Quarter En | Expended ading Date) | Reasons for Revised Target Dates |
| | Original Obligation End Date | Actual Obligation End Date | Original Obligation End Date | Actual Obligation End Date | |
| PHA-Wide | 6/12/2010 | | 6/12/2012 | | |
| TN022-001 | 6/12/2010 | | 6/12/2012 | | |
| TN022-004 | 6/12/2010 | | 6/12/2012 | | |
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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

U.S. Department of Housing and Urban Development Office of Public and Indian Housing OMB No. 2577-0226

Expires 4/30/2011

| Part I: \$ | Summary | | | | | Expires 4/30/2011 | |
|------------|---|---|--|---|-------------|---|--|
| | Housing Authority | Grant Type and Number Capital Fund Program Grant No: TN37P0225010 Date of CFFP: | • | using Factor Grant No: | | FFY of Grant:2007 FFY of Grant Approval: | |
| | nal Annual Statement rmance and Evaluation R | ☐Reserve for Disasters/ Emergencies ☐I eport for Period Ending: 12/31/08 | Revised Annual State ☐Final Perform | ment (revision no: ance and Evaluation F |) Report | | |
| Line | Summary by Developm | | Total Estima | | Total Actua | I Cost ¹ | |
| | | | Original | Revised ² | Obligated | Expended | |
| 1 | Total non-CFP Funds | | 0.00 | | | | |
| 2 | | ot exceed 20% of line 21) 3 | 5,000.00 | 9,146.07 | 0.00 | 0.00 | |
| 3 | 1408 Management Impro | vements | 45,000.00 | 44,355.36 | 43,498.48 | 22,998.98 | |
| 4 | 1410 Administration (may | y not exceed 10% of line 21) | 1,000.00 | 616.58 | 616.58 | 616.58 | |
| 5 | 1411 Audit | | 0.00 | 0.00 | 0.00 | 0.00 | |
| 6 | 1415 Liquidated Damage | es | 0.00 | 0.00 | 0.00 | 0.00 | |
| 7 | 1430 Fees and Costs | | 20,200.00 | 22,321.40 | 22,321.40 | 22,321.40 | |
| 8 | 1440 Site Acquisition | | 0.00 | 0.00 | 0.00 | 0.00 | |
| 9 | 1450 Site Improvement | | 5,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | |
| 10 | 1460 Dwelling Structures | | 119,774.88 | 120,535.47 | 118,086.47 | 20,535.47 | |
| 11 | 1465.1 Dwelling Equipme | ent—Nonexpendable | 0.00 | 0.00 | 0.00 | 0.00 | |
| 12 | 1470 Non-dwelling Struct | tures | 0.00 | 0.00 | 0.00 | 0.00 | |
| 13 | 1475 Non-dwelling Equip | ment | 21,519.12 | 19,519.12 | 19,519.12 | 19,519.12 | |
| 14 | 1485 Demolition | | 0.00 0.00 | | 0.00 0.00 | | |
| 15 | 1492 Moving to Work De | monstration | 0.00 | 0.00 | 0.00 | 0.00 | |
| 16 | 1495.1 Relocation Costs | | 0.00 | 0.00 | 0.00 | 0.00 | |
| 17 | 1499 Development Activi | ties ⁴ | 0.00 | 0.00 | 0.00 | 0.00 | |
| 18a | 1501 Collaterization or D | ebt Service paid by the PHA | 0.00 | 0.00 | 0.00 | 0.00 | |
| 18b | | ebt Service paid Via System of Direct Payment | 0.00 | 0.00 | 0.00 | 0.00 | |
| 19 | 1502 Contingency (may i | not exceed 8% of line 20) | 0.00 | 0.00 | 0.00 | 0.00 | |
| 20 | Amount of Annual Grant: | , | 217,494.00 | 217,494.00 | 205,042.05 | 86,991.55 | |
| 21 | Amount of line 20 Relate | d to LBP Activities | 0.00 | 0.00 | 0.00 | 0.00 | |
| 22 | Amount of line 20 Relate | d to Section 504 Activities | 0.00 | 0.00 | 0.00 | 0.00 | |
| 23 | Amount of line 20 Relate | d to Security – Soft Costs | 0.00 | 0.00 | 0.00 | 0.00 | |
| 24 | | ed to Security – Hard Costs | 0.00 | 0.00 | 0.00 | 0.00 | |
| 25 | | d to Energy Conservation Measures | 0.00 | 0.00 | 0.00 | 0.00 | |

¹ To be completed for the Performance and Evaluation Report ³ PHAs with under 250 units in management may use 100% of CFP Grants for operations ² To be completed for the Performance and Evaluation Report or a Revised Annual Statement ⁴ RHF funds shall be included here

| Part I: Summary | | | | | | | | | |
|-------------------------------------|---------------|---|----------------------------|--|-------------------------|--|--|--|--|
| PHA Name: Clinton Housing Authority | Capital Fu | oe and Number und Program Gran nent Housing Facto | 2007 | Federal FY of Grant: 2007 FFY OF Grant Approval: | | | | | |
| Type of Grant | | | | | | | | | |
| | Disasters/ Em | | vised Annual Statement (re | | | | | | |
| | naing: | | nal Performance and Evalua | ition Report | | | | | |
| Line Summary by Development Account | | Total | Estimated Cost | Total A | ctual Cost ¹ | | | | |
| | | Original | Revised ² | Obligated | Expended | | | | |
| Signature of Executive Director | Date | Date Signature of Public Housing Director | | | Date | | | | |
| _ | | | _ | | | | | | |
| | | | | | | | | | |

form **HUD-50075.1**(4/2008)

| PHA Name: Clinton Housing | g Authority | Grant Type and Capital Fund Pro Replacement Ho | gram Grar | | 250107 CFFP (| Federal FFY of Grant: 2007 | | | |
|---|--|--|--------------------|----|----------------------|----------------------------|---------------------------------|--------------------------------|-------------------|
| Development Number Name/HA-Wide Activities | General Description of Major Work Categories | | of Major Work Dev. | | Total Estimated Cost | | Total Actual Cost | | Status of Work |
| 7.0 | | | | | Original | Revised ¹ | Funds Obligated ² | Funds Expended ² | |
| PHA-Wide | Operations | | 1406 | LS | 5,000.00 | 9,146.07 | 0.00 | 0.00 | |
| PHA-Wide | Security | | 1408 | LS | 40,000.00 | 43,500.00 | 42,643.62 | 0.00 | |
| PHA-Wide | Computer Upgrade | | 1408 | LS | 3,500.00 | 0.00 | 0.00 | 0.00 | |
| PHA-Wide | Training / Travel | | 1408 | LS | 1,500.00 | 855.36 | 855.36 | 0.00 | |
| PHA-Wide | Advertising | | 1410 | LS | 1,000.00 | 616.58 | 616.58 | 0.00 | |
| PHA-Wide | Environmental Review | | 1430 | LS | 1,200.00 | 1,200.00 | 1,200.00 | 1,200.00 | |
| PHA-Wide | A/E Services | | 1430 | LS | 18,000.00 | 21,121.00 | 21,121.00 | 9,668.00 | |
| PHA-Wide | Lead-Based Paint Test | ting | 1430 | LS | 1,000.00 | 0.00 | 0.00 | 0.00 | |
| PHA-Wide | Tree removal | | 1450 | LS | 5,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | |
| PHA-Wide | Electrical | | 1460 | LS | 535.47 | 535.47 | 535.47 | 535.47 | |
| PHA-Wide | Office equipment | | 1475 | LS | 1,000.00 | 0.00 | 0.00 | 0.00 | |
| PHA-Wide | Maintenance equipmer | nt | 1475 | LS | 1,000.00 | 0.00 | 0.00 | 0.00 | |
| PHA-Wide | Vehicle | | 1475 | LS | 19,519.12 | 19,519.12 | 19,519.12 | 19,519.12 | |
| PHA-Wide | Contingency | | 1502 | LS | 0.00 | 0.00 | 0.00 | 0.00 | |
| TN022-001 | New energy efficient w | indows | 1460 | LS | 0.00 | 0.00 | 0.00 | 0.00 | |
| TN022-001 | Bathroom Renovations | | 1460 | LS | 99,239.41 | 100,000.00 | 98,359.00 | 16,000.00 | |
| TN022-002 | Bathroom Renovations | | 1460 | LS | 20,000.00 | 20,000.00 | 19,192.00 | 4,000.00 | |
| | | | | | | | | | _ |
| Total | | | | | 217,497.00 | 217,494.00 | 205,042.05 | 86,991.55 | |

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement. ² To be completed for the Performance and Evaluation Report.

| All Funds (Quarter En Original Obligation End Date 9/30/2011 9/30/2011 9/30/2011 | Expended nding Date) Actual Obligation End Date | Reasons for Revised Target Dates ¹ |
|--|--|---|
| 9/30/2011 9/30/2011 | | |
| 9/30/2011 | | |
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¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended.

| PAR | Part I: Summary | | | | | | | | |
|-------|---|---|--|--|--|--|--|--|--|
| PHA | Name/Number | | Locality (City/C | County & State) | ⊠Original 5-Year Plan | Revision No: | | | |
| Clint | ton Housing Authority / T | N022 | Clinton / Anderso | n Co., Tennessee | | | | | |
| A. | Development Number and Name | Work Statement for Year 1 FFY 2009 | Work Statement for Year 2 FFY 2010 | Work Statement for Year 3 FFY 2011 | Work Statement for Year 4 FFY 2012 | Work Statement for Year 5 FFY 2013 | | | |
| B. | Physical Improvements Subtotal | Annual Statement | 151,000.00 | 140,000.00 | 134,500.00 | 154,000.00 | | | |
| C. | Management Improvements | | 74,700.00 | 74,700.00 | 71,200.00 | 71,200.00 | | | |
| D. | PHA-Wide Non-dwelling Structures and Equipment | | 2,000.00 | 2,000.00 | 22,000.00 | 2,000.00 | | | |
| E. | Administration | | 500.00 | 500.00 | 500.00 | 500.00 | | | |
| F. | Other | | 1,000.00 | 1,000.00 | 1,000.00 | 1,000.00 | | | |
| G. | Operations | | 800.00 | 11,800.00 | 800.00 | 1,300.00 | | | |
| H. | Demolition | | - | <u> </u> | - | - | | | |
| I. | Development | | - | - | - | - | | | |
| J. | Capital Fund Financing – Debt Service | | - | _ | • | - | | | |
| K. | Total CFP Funds | | 230,000.00 | 230,000.00 | 230,000.00 | 230,000.00 | | | |
| L. | Total Non-CFP Funds | | - | 0.00 | 0.00 | 0.00 | | | |
| M. | Grand Total | | 230,000.00 | 230,000.00 | 230,000.00 | 230,000.00 | | | |

| | RT I: SUMMARY (CONTINU | DATION | T | | | |
|----|---|------------------------------------|---|---|---|---|
| | A Name/Number hton Housing Authority / T | N022 | | county & State) on Co., Tennessee | ☑Original 5-Year Plan [| Revision No: |
| A. | Development Number and Name | Work Statement for Year 1 FFY 2009 | Work Statement for Year 2 FFY 2010 | Work Statement for Year 3 FFY 2011 | Work Statement for Year 4 FFY 2012 | Work Statement for Year 5 FFY 2013 |
| | | Annual Statement | | | | |
| | PHA Wide | | \$130,000.00 | \$230,000.00 | \$110,200.00 | \$84,000.00 |
| | TN022-001 | | \$80,000.00 | \$0.00 | \$0.00 | \$0.00 |
| | TN022-002 | | \$20,000.00 | \$0.00 | \$0.00 | \$0.00 |
| | TN022-003 | | \$0.00 | \$0.00 | \$32,000.00 | \$146,000.00 |
| | TN022-004 | | \$0.00 | \$0.00 | \$87,800.00 | \$0.00 |
| | | | | | | |
| | CFP Funds Listed for 5- year planning | | \$230,000.00 | \$230,000.00 | \$230,000.00 | \$230,000.00 |
| | Replacement Housing Factor Funds | | NA | NA | NA | NA |

| Work Statement for | V | Vork Statement for Year 2010 FFY 2010 | | Work Statement for Year: 2011 FFY 2011 | | | |
|-----------------------|--|--|----------------|--|--------------------------------|----------------|--|
| Year 1 FFY 2009 | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | |
| SEE | | | | | | | |
| Statement | PHA-Wide | Sidewalk Repair/Replacement | \$5,000.00 | PHA-Wide | Sidewalk Repair/Replacement | \$1,000.0 | |
| | PHA-Wide | Landscaping | \$7,500.00 | PHA-Wide | Landscaping | \$10,000.0 | |
| | PHA-Wide | New Water Closets | \$7,500.00 | PHA-Wide | New Water Closets | \$1,000.0 | |
| | PHA-Wide | Door Hardware | \$10,000.00 | PHA-Wide | Door Hardware | \$1,000.0 | |
| | PHA-Wide | Mechanical | \$10,500.00 | PHA-Wide | Plumbing | \$27,000. | |
| | PHA-Wide | Electrical | \$10,500.00 | PHA-Wide | Site Improvements | \$20,000. | |
| | TN022-001 | Replace roofing | \$80,000.00 | PHA-Wide | Finishes | \$20,000. | |
| | TN022-002 | Replace roofing | \$20,000.00 | PHA-Wide | Doors | \$30,000. | |
| | | | | PHA-Wide | Windows | \$30,000. | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Subtotal of Estimated Cost | 151,000.00 | | Subtotal of Estimated Cost | 140,000 | |

| Work Statement for | V | Vork Statement for Year 2012 FFY 2012 | | Work Statement for Year: 2013 FFY 2013 | | | |
|-----------------------|--|--|----------------|--|-----------------------------|----------------|--|
| Year 1 FFY 2009 | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | Development Number/Name General Description of Major Work Categories | Quantity | Estimated Cost | |
| SEE | PHA-Wide | Sidewalk Repair/Replacement | \$1,000.00 | PHA-Wide | Sidewalk Repair/Replacement | \$1,000.00 | |
| Annual | PHA-Wide | Landscaping | \$5,000.00 | PHA-Wide | Landscaping | \$5,000.00 | |
| Statement | PHA-Wide | New Water Closets | \$1,000.00 | PHA-Wide | New Water Closets | \$1,000.00 | |
| | PHA-Wide | Door Hardware | \$1,000.00 | PHA-Wide | Door Hardware | \$1,000.00 | |
| | PHA-Wide | Lawn Mower | \$7,500.00 | PHA-Wide | Lawn Mower | \$0.00 | |
| | TN022-003 | Replace roofing at sites A and C | \$32,000.00 | TN022-003 | Replace roofing at sites B | \$55,000.00 | |
| | TN022-004 | Replace floor tile | \$87,000.00 | TN022-003 | Install new HVAC | \$91,000.00 | |
| | | Subtotal of Estimated Cost | 134,500.00 | | Subtotal of Estimated Cost | 154,000.0 | |

| Part III: Su | pporting Pages – Management Needs Work | Statement(s) | | |
|------------------------|--|----------------|---|----------------|
| Work | Work Statement for Year 2010 | 0 | Work Statement for Year: 201 | 1 |
| Statement for | FFY 2010 | | FFY 2011 | |
| Year 1 FFY 2009 | Development Number/Name General Description of Major Work Categories | Estimated Cost | Development Number/Name General Description of Major Work Categories | Estimated Cost |
| | 1 3 | | | |
| SEE | PHA-Wide: | | PHA-Wide: | |
| Annual | Operations | \$800.00 | Operations | \$11,800.00 |
| Statement | Security | \$44,000.00 | Security | \$44,000.00 |
| | Computer upgrade | \$1,000.00 | Computer upgrade | \$1,000.00 |
| | Travel | \$5,000.00 | Travel | \$5,000.00 |
| | Office equipment | \$1,000.00 | Office equipment | \$1,000.00 |
| | Maintenance equipment | \$1,000.00 | Maintenance equipment | \$1,000.00 |
| | Environmental Review | \$1,200.00 | Environmental Review | \$1,200.00 |
| | A/E Services | \$20,000.00 | A/E Services | \$20,000.00 |
| | Agency Plan | \$3,500.00 | Agency Plan | \$3,500.00 |
| | Advertising | \$500.00 | Advertising | \$500.00 |
| | Contingency | \$1,000.00 | Contingency | \$1,000.00 |
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| | Subtotal of Estimated Cost | \$79,000.00 | Subtotal of Estimated Cost | \$90,000.00 |

| Part III: Supporting Pages – Management Needs Work Statement(s) | | | | |
|---|--|----------------|--|----------------|
| Work | Work Statement for Year 2012 FFY 2012 | | Work Statement for Year: 2013 FFY 2013 | |
| Statement for | | | | |
| Year 1 FFY | Development Number/Name | Estimated Cost | Development Number/Name | Estimated Cost |
| 2009 | General Description of Major Work Categories | | General Description of Major Work Categories | |
| SEE | | | | |
| Annual | PHA-Wide: | | PHA-Wide: | |
| | Maintenance Vehicle | \$20,000.00 | Maintenance Vehicle | \$0.0 |
| | Operations | \$800.00 | Operations | \$1,300.0 |
| | Security | \$44,000.00 | Security | \$44,000.00 |
| | Computer upgrade | \$1,000.00 | Computer upgrade | \$1,000.00 |
| | Travel | \$5,000.00 | Travel | \$5,000.00 |
| | Office equipment | \$1,000.00 | Office equipment | \$1,000.00 |
| | Maintenance equipment | \$1,000.00 | Maintenance equipment | \$1,000.0 |
| | Environmental Review | \$1,200.00 | Environmental Review | \$1,200.0 |
| | A/E Services | \$20,000.00 | A/E Services | \$20,000.0 |
| | Advertising | \$500.00 | Advertising | \$500.0 |
| | Contingency | \$1,000.00 | Contingency | \$1,000.0 |
| | | | | |
| | | | | |
| | | | | |
| | Subtotal of Estimated Cost | \$95,500.00 | Subtotal of Estimated Cost | \$76,000.00 |